The Cabarrus County Mental Health Advisory Board held their quarterly meeting in the Multipurpose Room at the Cabarrus County Governmental Center in Concord, North Carolina on Wednesday, June 21, 2017, at 6:00 p.m.

Mike Downs, County Manager, called the meeting to order at 6:16 p.m.

Mental Health Advisory Board Members present were: Mike Downs, Jodi Ramirez, Ashlie Shanley, Mitzi Quinn, Catherine Combs, Brad Riley, Gary Gacek, Woody Chavis, Brian Hiatt, Darrell Hinnant, Del Eudy, Reid Thornburg, Marcella Beam, Tri Tang, Dr. Roderick Lilly, Georgia Lozier, Elizabeth Poole, Alan Thompson, Ben Rose, Gayle Alston, Pam Dubois, Steve Morris, Sonja Bohanan-Thacker, Kasia Thompson, Rebecca True, Bruce Burchfield, Megan Smit and Sheila Bruce.

WELCOME

Mike Downs, County Manager, welcomed all attendees. Introductions were made by all.

TASK FORCE REPORTS

Access to Resources and Care

Jodi Ramirez, standing in for Gwen Bartley, reported on the resources and care facilities accessible to Cabarrus County residents. Topics discussed were:

- The Acute Care Center located in the Charlotte University Area. This facility is a child/adolescent crisis center that provides short-term emergency services and assessments for youth. The facility is open to privately-insured and Medicaid patients. Monarch serves as the lead agency.
- Concerns if funding will be provided by the County for mental health advisors and response teams for Cabarrus County Schools (CCS) and Kannapolis City Schools (KCS) for FY18.
  - County management advised funding will be provided at the same level as FY17.
- Concerns over the introduction of State and Federal legislation, which could have a dramatic impact on mental health benefits, services and providers.
- Continuing to identify the availability of additional services and resources and promote communication among agencies.

Crisis Response Team

Sonja Bohanan-Thacker advised the following have been identified as primary focus areas for patient care:

- The inefficiency of gaining clearance for clients needing inpatient hospitalization; and the search for opportunities to handle this matter differently.
  - Checking into possible mobile unit to work with law enforcement.
Emergency Medical Services (EMS) personnel being able to take patient to the facility that best suits their needs.

Since beds are full most of the time at the Crisis Recovery Centers, determining how additional beds can be supplied.

Additional options for law enforcement to place individuals for treatment (rather than jail) when a Magistrate will not sign an order for commitment and treatment.
  - Recommend Magistrates participate in Mental Health 101 and Mental Health First Aid training.

Reid Thornburg, Cardinal Innovations, and Rebecca True, DayMark, provided updated information regarding Facility Based Crisis (FBC) facilities (formerly known as Community Recovery Centers (CRC)) as follows:

- DayMark in Kannapolis has moved to Concord and should open in July. This facility will still provide 16 beds for involuntary commitments.
- DayMark – Davidson site located in Lexington is expected to open in August, 2017 and will utilize 16 beds. It is hoped this will open up availability at the DayMark – Concord site for more Cabarrus County residents.
- DayMark sites located in Statesville, Union, Concord and Davidson will serve as a FBC network and assist each other to provide services for residents in all those communities. DayMark will provide transportation between sites.
- DayMark is building a 23-Hour bed facility in Forsyth County to address medical and behavioral issues.

Public Awareness

Kasia Thompson reported the team has identified the need to establish an understanding of mental health and mental illness for committee members and public officials prior to promoting information to the public. In that regard, the following steps have been taken:

- Mental Health America will present “Building a Mental Health Vocabulary” at the 2nd Quarter Summit in July. Attendees will also hear a personal story from a member of the community who has been affected by mental illness. Finally, attendees will be asked to register for classes. These classes are part of the Mental Health First Aid Curriculum and will be conducted August 5 through October 20, 2017.
- Recommend revisiting the Mission Statement at the September, 2017 Mental Health Advisory Board meeting.

UPDATES

Stepping Up

Sheriff Brad Riley, reported the Sheriff’s Office has had several internal meetings in connection with the Stepping Up initiative in the jails. Topics discussed were:

- What would the Stepping Up Program look like at the Cabarrus County jail? Some possible components identified were:
Employ a full-time case manager for case management
Create a mini mental health application to administer to every book-in.
Drug screening program for opioid issues.
Case manager to work with inmate while incarcerated and provide information for resources, access to appointments and contacts when booking out.
Next steps
- Sit down with Cardinal Innovations to discuss ways to work together without duplication of efforts.
- Cost for a full-time Case Manager.
- Work with Cardinal Innovations to quickly locate a full time case manager.

Sheriff Riley advised he is hopeful to implement the Stepping Up Program in the jail later this year, perhaps in the fall.

Lastly, school resource officers are in the final stages of developing a community awareness program for opioid use. The presentation will be on August 3, 2017 at Mt. Pleasant High School. A 30 minute program to present to other schools is being considered.

23-Hour Bed

Rebecca True, DayMark, reviewed information previously discussed regarding the DayMark network of sites. Ms. True then presented information on the 23-hour bed facility scheduled to open in the late fall in Winston-Salem. This facility will be used as a model to open future 23-hour bed facilities.

A discussion ensued regarding whether a county-funded facility would give residents of that county priority use.

There was a lengthy discussion regarding the detox and involuntary commitment services and evaluations offered by the 23-hour bed facility. Law enforcement, hospitals and emergency medical services shared information about their encounters and concerns when dealing with individuals requiring services for mental health and/or mental illness issues.

Community Paramedic Mental Health Program

Alan Thompson reported the Community Paramedic Program continues to grow. Currently paramedics have fairly extensive training on mental and behavioral health as well as toxicology and substance abuse, as part of their 18 month paramedic training. Additionally, with the exception of staff hired in the last 18 months, all have completed Mental Health First Aid training.

Mr. Thompson advised all Community Paramedics have completed a Community Paramedic Academy, the paramedic version of Crisis Intervention Team (CIT) and Critical Incident Stress Management (CISM).

Further, a Community Paramedic Educational Academy is being developed. As a pilot program, while developing the academy, Mr. Thompson is working to locate mental health facilities that will allow community paramedics to be scheduled clinical rotations with case managers and mental health professionals. This would add valuable insight to their training. The goal is to access patient’s needs, transport to the appropriate facility, and/or connect them to resources.
Finally, there was discussion regarding the need for mental health navigators, which would assist in coordination of post discharge needs, (i.e. prescriptions filled, transportation to appointments, follow-ups by EMS, etc.)

**General Comments**

Comments were shared in connection with the Mental Health presentation scheduled for the upcoming Summit.

Reid Thornburg advised the North Carolina Association of County Commissioners (NCACC) has rolled out an Opioid program for community leaders, law enforcement, schools officials and justice system. He encouraged attending a presentation, should anyone have the opportunity.

Georgia Lozier, expressed concerned for patients who have been on prescription medications for years especially now that rules are becoming more restrictive on prescribers and pharmacies.

**Adjourn**

The meeting adjourned at 7:31 p.m.